

Exhibit 2

Michigan Department of Corrections
Medical Detail Special Accommodations

Off #: 0770573

Offender Name: Sims, Dantrell Jayvone

☐ No Work

Exp. Date: _____

☐ Lay In

Exp. Date: _____

Housing Restriction:

☒ No Restrictions

Physical Limitation/Restriction

☒ No Restrictions

May have the following equipment in his / her possession:

Equipment	Start Date	End Date	Return Date
Splint	01/20/2023	03/20/2023	
fiberglass			
Ace Wrap	01/17/2023	01/20/2023	
see x-rays if still needed.			
Ice Pack	01/17/2023	01/20/2023	
Comments: N/A			

01/20/2023

Date

Offender Name: Sims, Dantrell Jayvone

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Lock: 500:020:Top:A

ALL EXPIRATION DATES ARE AT 24:00